

SC. SATISFACTION WITH CARE  
(BASELINE ONLY)

BOX SC1A	IF SP DECEASED OR INSTITUTIONALIZED, GO TO <b>BOX USA</b> .
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SC1. We're interested in how you feel about the medical services (you have/SP has) received [over the past year/ since (PREV. SUPPL. RD. INT. DATE)] from doctors and hospitals. Please tell me how satisfied you have been with the following:

The overall quality of the medical services (you have /SP has) received [over the past year/since (PREV. SUPPL. RD. INT. DATE)].

SHOW CARD SC1
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**MCQUALTY**

VERY SATISFIED ..... 1  
 SATISFIED ..... 2  
 DISSATISFIED ..... 3  
 VERY DISSATISFIED ..... 4  
 NOT APPLICABLE ..... 5  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

SC2. [Please tell me how satisfied you have been with . . .] The availability of medical services at night and on weekends.

SHOW CARD SC1
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**MCAVAIL**

VERY SATISFIED ..... 1  
 SATISFIED ..... 2  
 DISSATISFIED ..... 3  
 VERY DISSATISFIED ..... 4  
 NOT APPLICABLE ..... 5  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

SC3. [Please tell me how satisfied you have been with . . .] The ease and convenience of getting to a doctor from where (you live/SP lives).

SHOW CARD SC1
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**MCEASE**

VERY SATISFIED ..... 1  
 SATISFIED ..... 2  
 DISSATISFIED ..... 3  
 VERY DISSATISFIED ..... 4  
 NOT APPLICABLE ..... 5  
 REFUSED ..... -7  
 DON'T KNOW ..... -8

SC4. [Please tell me how satisfied you have been with . . .] The out-of-pocket costs (you/SP) paid for medical services.

SHOW
CARD
SC1

**MCCOSTS**

VERY SATISFIED .....	1
SATISFIED .....	2
DISSATISFIED .....	3
VERY DISSATISFIED .....	4
NOT APPLICABLE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

SC5. [Please tell me how satisfied you have been with . . .] The information given to (you/you or SP) about what was wrong with (you/SP).

SHOW
CARD
SC1

**MCINFO**

VERY SATISFIED .....	1
SATISFIED .....	2
DISSATISFIED .....	3
VERY DISSATISFIED .....	4
NOT APPLICABLE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

SC6. [Please tell me how satisfied you have been with . . .] The follow-up care (you/SP) received after an initial treatment or operation.

SHOW
CARD
SC1

**MCFOLUP**

VERY SATISFIED .....	1
SATISFIED .....	2
DISSATISFIED .....	3
VERY DISSATISFIED .....	4
NOT APPLICABLE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

SC7. [Please tell me how satisfied you have been with . . .] The concern of doctors for (your/SP's) overall health rather than just for an isolated symptom or disease.

SHOW
CARD
SC1

**MCCONCRN**

VERY SATISFIED .....	1
SATISFIED .....	2
DISSATISFIED .....	3
VERY DISSATISFIED .....	4
NOT APPLICABLE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

- SC8. [Please tell me how satisfied you have been with . . .] Getting all (your/SP's) medical care needs taken care of at the same location.

SHOW
CARD
SC1

**MCSAMLOC**

VERY SATISFIED .....	1
SATISFIED .....	2
DISSATISFIED .....	3
VERY DISSATISFIED .....	4
NOT APPLICABLE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

- SC8a. [Please tell me how satisfied you have been with . . .] The availability of care by specialists when (you feel/SP feels) (you/he/she) need(s) it.

SHOW
CARD
SC1

**MCSPECAR**

VERY SATISFIED .....	1
SATISFIED .....	2
DISSATISFIED .....	3
VERY DISSATISFIED .....	4
NOT APPLICABLE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

- SC8b. [Please tell me how satisfied you have been with . . .] The ease of obtaining answers to questions over the telephone about (your/SP's) treatment or prescriptions.

SHOW
CARD
SC1

**MCTELANS**

VERY SATISFIED .....	1
SATISFIED .....	2
DISSATISFIED .....	3
VERY DISSATISFIED .....	4
NOT APPLICABLE .....	5
REFUSED .....	-7
DON'T KNOW .....	-8

- SC9. What things about the medical services (you/SP) receive(s) are you dissatisfied with?

**MCDISSFY**

NOT DISSATISFIED WITH ANYTHING.....	1
RECORD ALL OTHER RESPONSES VERBATIM BELOW: .....	91

**MCDISVB1**

\_\_\_\_\_

**VCMDIS1****MCDISVB2**

\_\_\_\_\_

**VCMDIS2****MCDISVB3**

\_\_\_\_\_

**VCMDIS3****VCMDIS4**

SC10. What things about the medical services (you/SP) receive(s) need to be improved?

**MCIMPROV**

NOTHING NEEDS TO BE IMPROVED ..... 1

RECORD ALL OTHER RESPONSES VERBATIM BELOW:..... 91

**MCIMPVB1**

\_\_\_\_\_

**VCMCIMP1****MCIMPVB2**

\_\_\_\_\_

**VCMCIMP2****MCIMPVB3**

\_\_\_\_\_

**VCMCIMP3****VCMCIMP4**

SC10a. Next I'm going to read you a few statements about health and medical care. Please tell me whether each of the following statements is true or false.

(You worry/SP worries) about (your/his/her) health more than other people (your/his/her) age. [Is this statement true or false?]

**MCWORRY**

TRUE ..... 1

FALSE..... 2

REFUSED..... -7

DON'T KNOW ..... -8

SC10b. (You/SP) will do just about anything to avoid going to the doctor.

**MCAVOID**

TRUE ..... 1

FALSE..... 2

REFUSED..... -7

DON'T KNOW ..... -8

SC10c. When (you are/SP is) sick, (you try/he tries/she tries) to keep it to (yourself/himself/herself).

**MCSICK**

TRUE ..... 1

FALSE..... 2

REFUSED..... -7

DON'T KNOW ..... -8

SC10d. Usually, (you go/SP goes) to the doctor as soon as (you start/he starts/she starts) to feel bad.

**MCDRsoon**

TRUE ..... 1

FALSE..... 2

REFUSED..... -7

DON'T KNOW ..... -8

SC11. During (CURRENT YEAR), did (you/SP) have any health problem or condition about which you think (you/he/she) should have seen a doctor or other medical person, but did not?

<b>MCDRNSEE</b>	YES .....	1 (SC12)
	NO .....	2 (SC15)
	REFUSED .....	-7 (SC15)
	DON'T KNOW .....	-8 (SC15)

SC12. What was the health problem or condition?  
[ENTER ALL CONDITIONS.]

**CONDTION**  
**CONDSC12**

\_\_\_\_\_

SC12a. Did you attempt to see a doctor about this [READ CONDITION(S) BELOW]?  
[CONDITION(S) FROM SC12]  
[PROBE: By "attempt" I mean, did (you/SP) contact a doctor's office or other medical place in order to set an appointment or talk to someone about the condition(s)?]

<b>MCDRATMP</b>	YES .....	1
	NO .....	2
	REFUSED .....	-7
	DON'T KNOW .....	-8

SC13INTR. This card lists some reasons people have given for not seeing a doctor or other medical person about a health problem or condition.  
[PRESS ENTER TO CONTINUE.]

SHOW CARD SC2
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- SC13. Which of these reasons explains why (you/SP) did not see a doctor about the [READ CONDITION(S) BELOW]?  
 PROBE: Any other reason?  
 [CODE ALL THAT APPLY. PRESS CTRL/L TO LEAVE SCREEN.]

SHOW CARD SC2	MCRNSERS	DIDN'T THINK THE PROBLEM WAS SERIOUS .....	1	<b>BOX SC1B</b>
	MRCRCOST	THOUGHT IT WOULD COST TOO MUCH .....	2	<b>BOX SC1B</b>
	MCRTIME	DIDN'T HAVE TIME .....	3	<b>BOX SC1B</b>
	MCRAPPT	COULDN'T GET AN APPOINTMENT		
	M CRAVAIL	SOON ENOUGH .....	4	<b>BOX SC1B</b>
	MCRWAY	NO DOCTOR WAS AVAILABLE .....	5	<b>BOX SC1B</b>
	MCRFAMILY	DIDN'T HAVE A WAY TO GET TO THE DOCTOR .....	6	<b>BOX SC1B</b>
	MCRDRCDM	COULDN'T LEAVE OTHER FAMILY MEMBER .....	7	<b>BOX SC1B</b>
	MCRFEAR	THOUGHT DOCTOR COULDN'T DO MUCH		
	MCRDRCHG	ABOUT PROBLEM .....	8	<b>BOX SC1B</b>
	MCRACCP	WAS AFRAID OF FINDING OUT WHAT WAS		
		WRONG .....	9	<b>BOX SC1B</b>
	MCRDOCTR	DOCTOR CHARGED MORE THAN MEDICARE		
	MCRHOSP	WOULD PAY .....	10	<b>BOX SC1B</b>
	MCRNOCAR	COULDN'T FIND A DOCTOR WHO WOULD		
MCRUNABL	ACCEPT MEDICAID .....	11	<b>BOX SC1B</b>	
MCROTHR	OTHER (SPECIFY) _____			
MCROTHOS	_____	91	<b>BOX SC1B</b>	
	REFUSED .....	-7	(SC15)	
	DON'T KNOW .....	-8	(SC15)	

BOX SC1B	IF MORE THAN ONE REASON ENTERED IN SC13, GO TO SC14. OTHERWISE, GO TO SC15.
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SC14. Which of these was the main reason (you/SP) did not see a doctor about (this/these) condition(s) during (CURRENT YEAR)? [READ REASONS BELOW IF NECESSARY.]

- MCRMAIN**
- (DIDN'T THINK THE PROBLEM WAS SERIOUS ..... 1)
  - (THOUGHT IT WOULD COST TOO MUCH ..... 2)
  - (DIDN'T HAVE TIME ..... 3)
  - (COULDN'T GET AN APPOINTMENT SOON  
ENOUGH ..... 4)
  - (NO DOCTOR WAS AVAILABLE ..... 5)
  - (DIDN'T HAVE A WAY TO GET TO THE DOCTOR ..... 6)
  - (COULDN'T LEAVE OTHER FAMILY MEMBER ..... 7)
  - (THOUGHT DOCTOR COULDN'T DO MUCH  
ABOUT PROBLEM ..... 8)
  - (WAS AFRAID OF FINDING OUT WHAT WAS  
WRONG ..... 9)
  - (DOCTOR CHARGED MORE THAN MEDICARE  
WOULD PAY ..... 10)
  - (COULDN'T FIND A DOCTOR WHO WOULD  
ACCEPT MEDICAID ..... 11)
  - ([OTHER SPECIFY] ..... 91)

SC15. During (CURRENT YEAR), were any medicines prescribed for (you/SP) that (you/he/she) did not get? Please include refills of earlier prescriptions as well as prescriptions that were written or phoned in by a doctor.

- PMNOTGET**
- YES ..... 1 (SC16)
  - NO ..... 2 **BOX USA**
  - REFUSED ..... -7 **BOX USA**
  - DON'T KNOW ..... -8 **BOX USA**

SC16. What were the names of those medicines?  
[ENTER ALL MEDICINES. PRESS ENTER IF THERE ARE NO MORE MEDICINES.]

- PMNAME1** MEDICINE 1: \_\_\_\_\_
- PMNAME2** MEDICINE 2: \_\_\_\_\_
- PMNAME3** MEDICINE 3: \_\_\_\_\_
- PMNAME4** MEDICINE 4: \_\_\_\_\_
- PMNAME5** MEDICINE 5: \_\_\_\_\_

SC17INTR. This card lists some reasons people have given for not having prescriptions filled or refilled.  
[PRESS ENTER TO CONTINUE.]

SHOW  
CARD  
SC3

SC17. Which of these reasons explains why (you/SP) did not obtain the [READ MEDICINE(S) BELOW]?  
PROBE: Any other reason?  
[CODE ALL THAT APPLY. PRESS CTRL/L TO LEAVE SCREEN.]

SHOW  
CARD  
SC3

<b>PMNOCOND</b>	DIDN'T THINK MEDICINE WAS NECESSARY FOR THE CONDITION .....	1	<b>BOX SC2</b>
<b>PMNCOST</b>	THOUGHT IT WOULD COST TOO MUCH .....	2	<b>BOX SC2</b>
<b>PMNOCOV</b>	MEDICINE NOT COVERED BY INSURANCE OR MEDICAID .....	3	<b>BOX SC2</b>
<b>PMNOTIME</b>	DIDN'T HAVE TIME .....	4	<b>BOX SC2</b>
<b>PMNOSOON</b>	COULDN'T GET THE MEDICINE SOON ENOUGH.....	5	<b>BOX SC2</b>
<b>PMPHARM</b>	NO PHARMACY CONVENIENT .....	6	<b>BOX SC2</b>
<b>PMNOWAY</b>	DIDN'T HAVE A WAY TO GET MEDICINE .....	7	<b>BOX SC2</b>
<b>PMNOHELP</b>	DIDN'T THINK MEDICINE WOULD HELP CONDITION .....	8	<b>BOX SC2</b>
<b>PMREACT</b>	WAS AFRAID OF MEDICINE REACTIONS/ CONTRAINDICATIONS .....	9	<b>BOX SC2</b>
<b>PMNONEED</b>	FELT BETTER, DIDN'T NEED MEDICINE .....	10	<b>BOX SC2</b>
<b>PMNOLIKE</b>	DON'T LIKE TO TAKE MEDICINE .....	11	<b>BOX SC2</b>
	OTHER (SPECIFY) .....	91	<b>BOX SC2</b>
<b>PMOTHER</b>	REFUSED .....	-7	<b>BOX USA</b>
<b>PMOTHOS</b>	DON'T KNOW .....	-8	<b>BOX USA</b>

BOX  
SC2

IF MORE THAN ONE REASON ENTERED AT SC17, GO TO SC18. OTHERWISE, GO  
TO **BOX USA**.



SC18. Which of these was the main reason (you/SP) did not obtain (this/these) medicine(s) during (CURRENT YEAR)? [READ REASONS BELOW IF NECESSARY.]

- PMMAIN
- (DIDN'T THINK MEDICINE WAS NECESSARY  
FOR THE CONDITION ..... 1 )

(THOUGHT IT WOULD COST TOO MUCH ..... 2 )

(MEDICINE NOT COVERED BY INSURANCE OR  
MEDICAID ..... 3 )

(DIDN'T HAVE TIME ..... 4 )

(COULDN'T GET THE MEDICINE SOON ENOUGH ... 5 )

(NO PHARMACY CONVENIENT ..... 6 )

(DIDN'T HAVE A WAY TO GET MEDICINE ..... 7 )

(DIDN'T THINK MEDICINE WOULD HELP  
CONDITION ..... 8 )

(WAS AFRAID OF MEDICINE REACTIONS/  
CONTRAINDICATIONS ..... 9 )

(FELT BETTER, DIDN'T NEED MEDICINE ..... 10 )

(DON'T LIKE TO TAKE MEDICINE ..... 11 )

([OTHER SPECIFY] ..... 91 )

REFUSED ..... -7

DON'T KNOW ..... -8

BOX SC3	GO TO <b>BOX USA</b> .
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